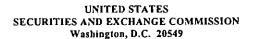
FORM D



FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

1165139

OMB APPROVAL
OMB Number: 3235-0076
Expires: April 30,2008
Estimated average burden
hours per response.....16.00

SEC US	E ONLY	
Prefix	Serial	
DATE F	ECEIVED	ROCE

0.002070	SECTION 4(0), AND		mmz O.V.	PROCESS
	UNIFORM LIMITED OFFERI	NG EXEM	PTION	
Name of Offering (check if the	his is an amendment and name has changed, and indica	ate change.)		NOV 1 6 201
Piedmont Pharmaceuticals LL				
Filing Under (Check box(es) that ap	oply): 🔲 Rule 504 🔲 Rule 505 🔽 Rule 506	Section 4(6)	□ ULOE	THOMSON
Type of Filing: New Filing	Amendment		SEC MAIL	FINANCIAL
	A. BASIC IDENTIFICATION	N DATA		7697
1. Enter the information requeste	d about the issuer		NOV 0	
Name of Issuer (check if this	is an amendment and name has changed, and indicate	change.)		3 2007 \\
Piedmont Pharmaceuticals LLC	>			
Address of Executive Offices	(Number and Street, City, St	atc, Zip Code)	Telephone Number (Including	& Viole Cone
204 Muirs Chapel Road, Suite	200, Greensboro, NC 27410		336-544-0320	
Address of Principal Business Oper	ations (Number and Street, City, S	tate, Zip Code)	Telephone Number (Include	ng Area Code)
(if different from Executive Offices	i)			
Brief Description of Business				
develop, license, and distribute	e human and animal pharmaceuticals			
Type of Business Organization		<u></u>	please specify): limited]	
corporation business trust	limited partnership, already formedlimited partnership, to be formed	other (F	already formed
	Month Year			
Actual or Estimated Date of Incorp			mated	
Jurisdiction of Incorporation or Org	ganization: (Enter two-letter U.S. Postal Service abbro CN for Canada; FN for other foreign jur			
	Civitor Canada, Fivitor other foreign jur	isuiction)	NC	
GENERAL INSTRUCTIONS				
Federal:	on offering of recurities in reliance on an everyntion uno	ler Pegulation D	or Section 4(6), 17 CFR 230 5017	etsea or 15115 C

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. General and/or Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Johnson, Roland H. Business or Residence Address (Number and Street, City, State, Zip Code) 204 Muirs Chapel Road, Suite 200, Greensboro, NC 27410 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Beneficial Owner Promoter Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

				B. IN	FORMATI	ON ABOU	r offerin	∛G				
l Usa +1-	ingua- aala	l or door st	- ingua- :-	tand to a-1	1 10 202	oraditad :-	wasters in	thic offeri	na?		Yes	No
i. Has the	issuer sold	l, or does th			Appendix,					***************************************		X
2. What is	the minim	um investm									\$ 20,0	00.00
				•		•					Yes	No
		permit joint										
commis If a pers or states	sion or sim on to be lis s, list the na	ion request ilar remune ted is an ass ime of the b you may so	ration for s sociated pe roker or de	olicitation rson or age aler. If mo	of purchase nt of a brok re than five	rs in conne er or dealer (5) person	ction with registered is to be liste	sales of sec with the S ed are asso	urities in tl EC and/or	ie offering. with a state		
Full Name (I N/A	Last name	first, if indi	iviđual)									
Business or	Residence	Address (N	lumber and	Street, Ci	ty, State, Z	ip Code)	-					
						,						
Name of Ass	sociated Bi	oker or De	aler									
States in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit I	Purchasers						
(Check	"All State:	s" or check	individual	States)			•••••		•••••		All	States
AL	AK	AZ	AR	CA	[CO]	CT	DE	DC	FL	GA	HI	[ID]
IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT RI	NE SC	NV SD	<u>NH</u> [TN]	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
		النان	111				<u> </u>		[#Y Y]		14 1	
Full Name (Last name	first, if ind	ividual)									
Business or	Residence	Address ()	Number an	d Street. C	ity, State 2	Zip Code)	•					
				, -		· ,						_
Name of As	sociated B	roker or De	aler									
States in WI	nich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers		<u> </u>				
(Check	"All State:	s" or check	individual	States)		***************************************	***************************************	·····	•••••		□ A1	States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IN		KS)	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	<u>OK</u>	OR	PA
RI	SC	SD	TN	TX	UT	VT	VĀ	$\overline{\mathbf{W}}\mathbf{A}$	WV	WI	WY	PR
Full Name (Last name	first, if ind	ividual)									
Business or	Residence	· Address ()	Number on	d Street C	ity State	Zin Code)				-		
manness Of	vesinence	. 11001035 (1	vamoer all	u 011661, C	icy, biatt, i	Pih Conc)						
Name of As	sociated B	roker or De	aler									
States in WI	ich Persor	1 Listed Has	s Solicited	or Intende	to Solicit	Purchasers						
		s" or check						*************			□ Al	l States
<u>. </u>				•								
[AL]	AK IN	AZ IA	AR KS	CA KY	CO LA	CT ME	DE MD	DC MA	FL MI	[GA] [MN]	MS MS	ID MO
MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		Amount Already
	Type of Security	Offering Price	Sold
	Debt	S	\$
	Equity	s	S
	Common Preferred		500 000 00
	Convertible Securities (including warrants)	\$_520,000.00	\$
	Partnership Interests		\$
	Other (Specify)	s	\$
	Total		\$ 520,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	10	\$_520,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		s
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		
	Total		s 520,000.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	7	\$_5,000.00
	Accounting Fees		s
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)	<u> </u>	s
	Total	_	\$ 5,000.00

	CONTERNACIONAL NUMBERO CON ESTORA ESTADAS ESTADAS ESTADAS ESTADAS ESTADAS ESTADAS ESTADAS ESTADAS ESTADAS ESTA	ROCERDS	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		<u>\$515,000.00</u>
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		
	Purchase of real estate		. 🗆 s
	Purchase, rental or leasing and installation of machinery and equipment	s	s
	Construction or leasing of plant buildings and facilities	s	. 🗆 \$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	□\$	□\$
	Repayment of indebtedness		
	• •		
	Working capital Other (specify):	s	\$ 515,000.00
			_ 🗆 \$
	Column Totals	s	
	Total Payments Listed (column totals added)	_ s_5	15,000.00
Į.	THE REPORT OF THE PARTY OF THE		
enc:			
sig	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notic nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commi information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of	ssion, upon writt	
Īss	uer (Print or Type) Signature	Date	
~		10/29/0	\ 7
R	edmont tharmodeuticals (IC)	U)
	me of Signer (Print or Type) File of Signer (Print or Type)	10124/0	

- ATTENTION -

intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

STANDSTONATURE CONTROL OF THE STANDSTONATURE		
Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No XX
See Appendix, Column 5, for state response.		

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	10:	In
	Signature	Date
Hedmont Pharmaceuticals w	MAHWA	1 P/29/07
Name (Print or Type)	Title (Print or Type)	
Joe Dawd	1 CFO	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AP	PENDIX				
1	Intend to non-a investor	1 to sell accredited is in State i-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4 Tinvestor and rchased in State C-Item 2)		under Sta (if yes, explana	ification ate ULOE attach ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR			SEE ATTAC	ED					
CA							<u> </u>		
СО		To be supplementation of the supplementation		_					
СТ	*	January and the state of the st		_					
DE		<u> </u>		-					
DC	one promotes a company			-					
FL									<u> </u>
GA									
HI				<u> </u>	ļ				<u> </u>
ID	*,							<u> </u>	
IL	*****************				<u> </u>				<u> </u>
IN									
IA									<u> </u>
KS								<u> </u>	
KY									
LA					-				
ME									
MD									
MA									
MI		<u> </u>							
MN		<u> </u>	-						
MS									

APPENDIX 1 2 3 Disqualification under State ULOE Type of security Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of offered in state amount purchased in State waiver granted) investors in State (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Non-Accredited Accredited State Yes No Investors Investors Amount Yes No Amount MO MT NE NV NH NJ NM NY NC NDOH OK OR PA RI SC SD TNTX UT VTVA WA wv WI

· SEE ATTACHED

			·	APP	ENDIX				
1		2	3			4		5 Disgual	ification
	to non-a	to sell accredited as in State a-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	f investor and rchased in State C-Item 2)		under Sta (if yes, explan- waiver	ate ULOE
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY						-			
PR									

Attachm	ent to Forn	n D - Piedmo	Attachment to Form D - Piedmont Pharmaceuticals LLC				-		
July 31,	2007 Conv	July 31, 2007 Convertible Note Offering							
-		2	3		4			2	
	Intend to	Intend to sell to non-	Type of security and					Diqualification under State	under State
<u> </u>	accredite	accredited investors	aggregate offering price			:		ULOE (if yes, attach	es, attach
	in State (in State (Part B-Item 1)	offered in State (Part C- Item 1)	Type of inv	Type of investor and amount purchased in State (Part C- Item 2)	chased in (state (Part C-	explanation of waiver granted) (Part E-Item 1)	of waiver rt E-Item 1)
						Number of	<u>.</u>		
				Number of		Non- Accredited			
State	Yes	g		Investors	Amount	Investors	Amount	Yes	N _O
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¥2									Ì
AR									
ઇ.									
8									
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딢									
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Type of security and accredited investors of freed in State (Part C. 1) Number of the store (Part B-tern offered in State (Part C. 1) Number of the store (Part B-tern offered in State (Part C. 1) Number of the store (Part B-tern offered in State (Part C. 1) Number of the store (Part B-tern offered in State (Part C. 1) Number of the store (Part B-tern offered in State (Part C. 1) Number of the store (Part B-tern offered in State (Part C. 1) Number of the store (Part B-tern offered in State (Part C. 1) Number of the store (Part B-tern offered in State (Part C. 1) Number of the store (Part B-tern offered in State	The first of the	The first of the	July 31,	2007 Conve	July 31, 2007 Convertible Note Offering	July 31, 2007 Convertible Note Offering						
Type of security and accredited investors aggregate offering price in State (Part C. 17) Number of Investors	Type of security and accredited investors aggregate offering price in State (Part C. 1) Item 2) Number of tem 1) Number of tem 2) Number of tem 2) Number of tem 3) Number of tem 4) Number of tem 3) Number of tem 3) Number of tem 4) Number of tem 3) Number of tem 4) Number of tem 3) Number of tem 4) Number	No. Type of security and accredited investors aggregate offering price Type of investor and amount purchased in State (Part C. 1) Number of tem 2) Number of tem 2) Number of tem 3) Number of tem 4) Number of tem 3) Number of tem 3) Number of tem 4) Number o	-		2			4			2	
accredited investors aggregate offering price in State (Part C. 1ype of investor and amount purchased in State (Part C. 1ype of investor and amount purchased in State (Part C. 1ype of investor and amount purchased in State (Part C. Non-horstor) Number of Non-horstors Number of Investors Amount Investors Amount Investors Amount Accredited Investors Amount Investors	1	1		Intend to	sell to non-	Type of security and					Diqualification	under Sta
1	1	10 10 10 10 10 10 10 10		accredited	d investors	aggregate offering price	Type of jave	zija tanome bae rotes	hased in State	o (Part C.	ULOE (if ye	s, attach
Yes No Number of Accredited Investors Amount Accredited Investors Yes X convertible note; \$20,000 1 \$50,000.00 Investors Investors <td>Yes No Number of Accredited Accredited Investors Amount Accredited Anount Investors Amount Accredited Anount Investors Amount Accredited Anount Investors Amount Investors Amount Accredited Accredited Accredited Accredited Investors Yes X convertible note; \$20,000 1 \$50,000.00 <td>Yes No Number of Accredited Amount Number of Accredited Amount No Accredited Amount Amount Yes X convertible note; \$20,000 6 \$450,000.00 6 \$450,000.00 7 \$50,000.00 7 \$50,000.00 7 \$50,000.00 7 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 <t< td=""><td></td><td>) Sidic (i</td><td>1)</td><td>Item 1)</td><td>i y pe oi iii v</td><td>estor and amount pur Item 2)</td><td></td><td>ים (נימור כי</td><td>granted) (Par</td><td>t E-Item 1)</td></t<></td></td>	Yes No Number of Accredited Accredited Investors Amount Accredited Anount Investors Amount Accredited Anount Investors Amount Accredited Anount Investors Amount Investors Amount Accredited Accredited Accredited Accredited Investors Yes X convertible note; \$20,000 1 \$50,000.00 <td>Yes No Number of Accredited Amount Number of Accredited Amount No Accredited Amount Amount Yes X convertible note; \$20,000 6 \$450,000.00 6 \$450,000.00 7 \$50,000.00 7 \$50,000.00 7 \$50,000.00 7 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 <t< td=""><td></td><td>) Sidic (i</td><td>1)</td><td>Item 1)</td><td>i y pe oi iii v</td><td>estor and amount pur Item 2)</td><td></td><td>ים (נימור כי</td><td>granted) (Par</td><td>t E-Item 1)</td></t<></td>	Yes No Number of Accredited Amount Number of Accredited Amount No Accredited Amount Amount Yes X convertible note; \$20,000 6 \$450,000.00 6 \$450,000.00 7 \$50,000.00 7 \$50,000.00 7 \$50,000.00 7 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 \$20,000.00 8 <t< td=""><td></td><td>) Sidic (i</td><td>1)</td><td>Item 1)</td><td>i y pe oi iii v</td><td>estor and amount pur Item 2)</td><td></td><td>ים (נימור כי</td><td>granted) (Par</td><td>t E-Item 1)</td></t<>) Sidic (i	1)	Item 1)	i y pe oi iii v	estor and amount pur Item 2)		ים (נימור כי	granted) (Par	t E-Item 1)
Yes No Accredited Investors Amount Amount Investors Amount Amount Amount Amount Investors Amount Amount Ves X convertible note; \$20,000 8 \$450,000.00 1 \$50,000.00 X convertible note; \$20,000 1 \$50,000.00 1 \$50,000.00 X convertible note; \$20,000 1 \$50,000.00 1 \$50,000.00 X convertible note; \$20,000 1 \$520,000.00 1 \$520,000.00	Yes No Accredited Investors Investors Amount Investors	Yes No Accordited Investors Amount Accordised Accordised Investors Amount Accordised Accordised Investors Amount Accordised Amount Accordised Yes X convertible note; \$20,000 1 \$50,000.00 550,000.00 1 \$50,000.00 1 X </td <td></td> <td></td> <td></td> <td></td> <td>Mumborof</td> <td></td> <td>Number of</td> <td></td> <td></td> <td></td>					Mumborof		Number of			
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